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FACSIMILE COVER SHEET

Deliver to: Nobahar, Abdulhakim, USPTO Art Group: 2132
 Facsimile No.: 703-872-9306 Date: February 22, 2005

From: Jordan M. Becker, Reg. No. 39,602

Our Docket No.: 3399P044 Number of pages 12 including this sheet.

Application No.: 09/866,037 Filing Date: 5/24/2001

Docket Due Date(s): 2/28/2005

Enclosed are the following documents:

- | | |
|---|---|
| <input checked="" type="checkbox"/> Amendment: ..Response.. (<u>9</u> pgs) | <input type="checkbox"/> Issue Fee Transmittal |
| <input type="checkbox"/> Appeal Brief (<u> </u> pgs) | <input type="checkbox"/> Notice of Appeal |
| <input type="checkbox"/> Application: ..
(<u> </u> pgs) w/cover & abstract) | <input type="checkbox"/> Petition for: .. |
| <input type="checkbox"/> Assignment & Cover Sheet (<u> </u> pgs) | <input type="checkbox"/> Request for Continued Examination (RCE) |
| <input checked="" type="checkbox"/> Certificate of Facsimile | <input type="checkbox"/> Reply Brief (<u> </u> pgs) |
| <input type="checkbox"/> Continued Prosecution Application (CPA) | <input type="checkbox"/> Request & Certification Under 35 USC 122(b)(2)(B)(i) |
| <input type="checkbox"/> Declaration & POA (<u> </u> pgs) | <input type="checkbox"/> Request to Rescind Previous Nonpublication Request |
| <input type="checkbox"/> Drawings: .. sheets, .. figures | <input type="checkbox"/> Response to Notice of Missing Parts & Formalities Letter |
| <input type="checkbox"/> Extension of Time: .. | <input type="checkbox"/> Response to Written Opinion (<u> </u> pgs) |
| <input checked="" type="checkbox"/> Fee Transmittal (in duplicate) | <input type="checkbox"/> Terminal Disclaimer |
| <input type="checkbox"/> IDS & PTO/SB/08 (<u> </u> pgs) | <input type="checkbox"/> Transmittal of Publication Fee Due |
| <input type="checkbox"/> Other .. | <input type="checkbox"/> Transmittal Letter |

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8A)

I hereby certify that this correspondence is being transmitted by facsimile on the date shown below to the United States Patent and Trademark Office.

Julie Arango
 Julie Arango

02/22/2005

Date


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FEE TRANSMITTAL for FY 2005 <i>Patent fees are subject to annual revision.</i>		Complete if Known		
		Application Number	09/866,037	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		Filing Date	May 24, 2001	
		First Named Inventor	Fergus M. Wills	
		Examiner Name	Nobahar, Abdullahakim	
		Art Unit	2132	
TOTAL AMOUNT OF PAYMENT (\$)		0.00	Attorney Docket No.	3399P044

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) <input checked="" type="checkbox"/> Credit any overpayments	
under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.	

FEE CALCULATION																																																																																																																									
1. EXTRA CLAIM FEES																																																																																																																									
<table border="0"> <tr> <td>Total Claims</td> <td>14</td> <td>- 4*</td> <td>=</td> <td>0</td> <td>x</td> <td>50.00</td> <td>=</td> <td>\$0.00</td> </tr> <tr> <td>Independent Claims</td> <td>5</td> <td>- 10*</td> <td>=</td> <td>0</td> <td>x</td> <td>200.00</td> <td>=</td> <td>\$0.00</td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		Total Claims	14	- 4*	=	0	x	50.00	=	\$0.00	Independent Claims	5	- 10*	=	0	x	200.00	=	\$0.00	Multiple Dependent																																																																																																					
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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Jordan M. Becker	Registration No. (Attorney/Agent)	39,602
Signature		Telephone	(408) 720-8300
		Date	02/22/05

Based on PTO/SD-17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wtr) 12/15/2004.
 SPND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

FEE TRANSMITTAL for FY 2005 <i>Patent fees are subject to annual revision.</i>		Complete if Known	
		Application Number	09/866,037
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		Filing Date	May 24, 2001
		First Named Inventor	Fergus M. Wills
TOTAL AMOUNT OF PAYMENT (\$) 0.00		Examiner Name	Nobahar, Abdulhakim
		Art Unit	2132
		Attorney Docket No.	3399P044

METHOD OF PAYMENT (check all that apply)

- ☐ Check ☐ Credit card ☐ Money Order ☒ None ☐ Other (please identify): _____
☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP
 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayment of fee(s) ☒ Credit any overpayments
 under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.

FEE CALCULATION
1. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
14	4*	0	\$0.00
Independent Claims	5	0	\$0.00
Multiple Dependent			

Large Entity	Small Entity	Fee Description
Fee Code (\$)	Fee Code (\$)	
1202 50	2202 25	Claims in excess of 20
1201 200	2201 100	Independent claims in excess of 3
1203 300	2203 100	Multiple Dependent claim, if not paid
1204 300	2204 150	**Reissue independent claims over original patent
1205 300	2205 150	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (1) (\$) 0.00

*or number previously paid, if greater. For Reissues, see below

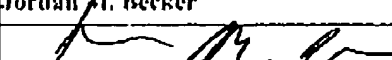
2. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description
Fee Code (\$)	Fee Code (\$)	
1051 130	2051 65	Surcharge - late filing fee or oath
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet
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1401 500	2401 250	Notice of Appeal
1402 500	2402 250	Filing a brief in support of an appeal
1403 1,000	2403 500	Request for oral hearing
1451 1,510	2451 1,610	Petition to institute a public use proceeding
1450 130	2450 130	Petitions to the Commissioner
1807 50	1807 50	Processing fee under 37 CFR 1.17(a)
1806 180	1806 180	Submission of Information Disclosure Stmt
1809 790	1809 395	Filing a submission after final rejection (37 CFR § 1.129(a))
1810 790	2810 325	For each additional invention to be examined (37 CFR § 1.129(b))

Other fee (specify)

SUBTOTAL (2)

(\$)

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Jordan M. Becker	Registration No. (Attorney/Agent)	39,602
Signature		Telephone	(408) 720-8300
		Date	02/22/05

 Based on PTO/S4217 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (w/r) 12/15/2004.
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FEB 22 2005

Attorney Docket No.: 3399P044

Patent

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application for:

Fergus M. Wills

Serial No.: 09/866,037

Filing Date: May 24, 2001

For: METHOD AND APPARATUS FOR
PROTECTING IDENTITIES OF
MOBILE DEVICES ON A WIRELESS
NETWORK

Examiner: Nobahar, Abdulhakim

Art Unit: 2132

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

<i>Certificate of Transmission</i>	
<i>I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office on:</i>	
<u>February 22, 2005</u>	
(Date of Transmission)	
<u>Julie Arango</u>	
(Printed name)	
<u>Julie Arango</u>	<u>2/22/05</u>
(Signature)	(Date)

AMENDMENT AND RESPONSE TO OFFICE ACTION

Dear Sir:

In response to the Office Action mailed on November 30, 2004, please enter the following amendment and consider the remarks below: